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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

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**DECLARATION FOR UTILITY OR
 DESIGN
 PATENT APPLICATION
 (37 CFR 1.63)**

☒ Declaration Submitted with Initial Filing OR ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Dock t Number 2047-179

First Named Inventor David W. Bell

COMPLETE IF KNOWN

Application Number /

Filing Date February 18, 2001

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

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(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) [] as United States Application Number or PCT International

Application Number [] and was amended on (MM/DD/YYYY) [] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

DECLARATION — Utility or Design Patent Application

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City

State

ZIP

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :



A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) David W.

Family Name
or Surname

Bell

Inventor's
Signature

Date

1/17/01

Residence: City Anaheim

State CA

Country US

Citizenship US

Mailing Address 2057 W. Falmouth Avenue

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City Anaheim

State CA

ZIP 92801

Country US

NAME OF SECOND INVENTOR:



A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any])

Family Name
or SurnameInventor's
Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address

Mailing Address

City

State

ZIP

Country

☐ Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

ASSIGNMENT

In consideration of good and valuable consideration, of which I acknowledge receipt, I sell and assign to Beckman Coulter, Inc. a Delaware Corporation, its successors and assigns the entire right, title and interest in and to the improvements in

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invented by me, as described in the application for United States patent executed currently herewith, and any and all applications for patent and patents therefor in any and all countries, including all divisions, reissues, continuations and extensions thereof, and all rights of priority resulting from the filing of said United States application, and authorize and request any official whose duty it is to issue patents, to issue any patent on said improvements or resulting therefrom to said Beckman Coulter, Inc., or its successors or assigns and agree that on request and without further consideration, but at the expense of said Corporation, I will communicate to said Corporation or its representatives or nominees any facts known to me respecting said improvements and testify in any legal proceeding, sign all lawful papers, execute all divisional, continuing and reissue applications, make all rightful oaths and generally do everything possible to aid said Corporation, its successors, assigns, and nominees to obtain and enforce proper patent protection for said invention in all countries.

IN TESTIMONY WHEREOF, I hereunto set my hand this 17th day of January, 2001.

David W. Bell
David W. Bell

STATE OF CALIFORNIA)
 v) SS.
COUNTY OF ORANGE)

On January 17, 2001, before me, Susan C. McRae, a Notary Public for the State and County aforesaid, personally appeared DAVID W. BELL, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument and acknowledged to me that he executed the same in his authorized capacity, and that by his signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.

WITNESS my hand and official seal.



Susan C. McRae
Notary Public

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PTO/SB/81 (10-00)

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	February 18, 2001
First Named Inventor	David W. Bell
Group Art Unit	
Examiner Name	
Attorney Docket Number	2047-179

I hereby appoint:

☒ Practitioners at Customer Number

22471

OR AND

☒ Practitioner(s) named below:

Name	Registration Number
Russell E. Fowler, II	43,615

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as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☒ The above-mentioned Customer Number.

OR

<input checked="" type="checkbox"/> Firm or Individual Name	ATTN: WILLIAM H. MAY/A42C BECKMAN COULTER, INC.			
Address	4300 N. Harbor Boulevard			
Address	Box 3100			
City	Fullerton	State	CA	Zip 92834-3100
Country	US			
Telephone	714/773-6929	Fax	714/773-7936	

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	David W. Bell
Signature	<i>DWBell</i>
Date	January 17, 2001

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.